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FORM D /

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FEPS- 1 2007

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:						
Estimated averag	e burden					
hours per respons	se 16.00					

SEC USE ONLY							
Prelix	Serial						
DATE RECEIVED							
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SECTION 4(6), AND/OR	DATE RECEIVED
UNIFORM LIMITED OFFERING EXEMP	PTION L
Name of Offering \(\bigcirc\) check if this is an amendment and name has changed, and indicate change.) MBS-Ashley House, Ltd.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	□ nroe
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) MBS-Ashley House, Ltd.	
Address of Executive Offices (Number and Street, City, State, Zip Code) One Galleria Blvd, Suite 1950, Metairie, LA 70001	Telephone Number (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) 3903 South Mason Rd., Houston, TX Brief Description of Business	Telephone Number (Including Area Code)
Own and manage 276 apartment home complex located in San	Antonio, Texas.
Type of Business Organization corporation limited partnership, already formed other (p	lease specify): PROCESSED
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: OTT OTT Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 774(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- attention -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB contains the form displays a currently valid OMB contains the form of the contains the form of the contains the form of the contains the con

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A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issue
Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner
3903 South Mason, LLC Full Name (Last name first, if individual)
,
One Galleria Blvd., Suite 1950, Metairie, LA 70001 Business or Residence Address (Number and Street, City, State, Zip Code)
Business of Residence Address (Municer and Street, City, State, Lip Code)
Check Box(es) that Apply: 💢 Promoter 🙀 Beneficial Owner 🔯 Executive Officer 🗌 Director 🧧 General and/or Managing Partner
Full Name (Last name first, if individual)
White, Ed
Business or Residence Address (Number and Street, City, State, Zip Code)
2637 Edenborn Avenue, Suite 100, Metairie, LA 70002
Check Box(es) that Apply: 🔀 Promoter 🕏 Beneficial Owner 🔀 Executive Officer 🗌 Director 🔲 General and/or Managing Partner
Full Name (Last name first, if individual)
Smuck, Michael B.
Business or Residence Address (Number and Street, City, State, Zip Code)
One Galleria Blvd., Suite 1950, Metairie, LA 70001
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Monaging Partner
Full Name (Last name first, if individual)
MBS Realty Investors, Ltd.
Business or Residence Address (Number and Street, City, State, Zip Code)
One Galleria Blvd., Suite 1950, Metairie, LA 70001
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Ed White & Associates, L.L.C.
Business or Residence Address (Number and Street, City, State, Zip Code)
2637 Edenborn Ave., Suite 100, Metairie, LA 70002
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
MBS-AH, Inc.
Business or Residence Address (Number and Street, City, State, Zip Code)
One Galleria Blvd., Suite 1950, Metairie, LA 70001

L					B, 11	IFORMATI	ON ABOU	T OFFERI	NG	• • • •			<u> </u>
1	Une the	issues sale	l os dons il						.1.1		*********	Yes	No
١.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								€	烫			
2.	· · · · · · · · · · · · · · · · · · ·								«50.	000.00			
	***************************************		an micsin		in be acce	pico mom u	ny marvio	Jul;	*************	*************	************	Yes	No
3.	Does th	e offering	permit join	t ownershi	pofasing	le unit?		************					
4.			ion request ilar remune										
	If a pers	on to be lis	ted is an ass	sociated po	rson or age	nt of a brok	er or deale	r registered	l with the S	EC and/or	with a state	2	
			ime of the b you may s							ciated pers	ons of sucl	1	
Ful			first, if indi						''	<u></u>	 .	<u></u>	
_													
Bu	siness or	Residence	Address (N	lumber and	Street, Ci	ty, State, Z	ip Code)					_	
Na	me of Ass	sociated Br	oker or De	aler		<u>-</u>			***************************************	······································			
Sta	ites in Wh	nich Person	Listed Has	s Solicited	or Intends	to Solicit 1	urchasers				_		
	(Check	"All States	" or check	individual	States)			**************************************			**************	□ vi	States
	AL	AK	AZ	AR	CA]	[CO]	CT	DE	[DC]	FL	(GA)	HI	
			IA.	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	HM (MT)	TX TX	NM UT	\\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	NC VA	ND WA	OH WV	OK)	OR	PA
		[36]	[35]	[174]		[01]	(41)		[WA]	[WV]	WI]	WY	[PR]
Fu	Il Name (Lost name	first, if ind	ividual)									-
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
_					· · · · · · · · · · · · · · · · · · ·								
Na	me of As	sociated Bi	oker or De	aler									
Str	ates in Wi	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit 1	urchasers				-		.
	(Check	"All States	s" or check	individual	States)	*************						☐ AI	States
	AL	AK	ΙΑΖΊ	AR	CA	[50]	(CT)	[DE]	(DC)	[ET]	(Ĉ.A.)	—	GS.
		IN	[A]	KS	KY	LA	ME	MD	MA	MI	IGA) MN	MS	MO
	MT	NE	NV	NH	[III]	NM	NY	NC	ND	OH)	OK)	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WY	(WI)	WY	PR
			•			ست	سي	(XO)	(WA)	للت	دست		
Fu	II Name (first, if ind						<u></u>				
_	·	Last name		iviđual)				<u> </u>	(WA)				
Bu	isiness oi	Last name	first, if ind	ividual) Number an					<u> </u>				
Bu	isiness oi	Last name	first, if ind	ividual) Number an				<u> </u>					
Bu	isiness or	Last name r Residence sociated B	first, if ind	ividual) Number an	od Street, C	ity, State, :	Zip Code)						
Bu	isiness or	Last name r Residence sociated B	first, if ind Address (i	ividual) Number an aler s Solicited	of Street, C	ity, State, i	Zip Code)						l States
Bu	isiness or time of As nics in Wi (Check	Last name r Residence sociated B	first, if ind Address () roker or De	ividual) Number an aler s Solicited	of Street, C	ity, State, i	Zip Code)					() Al	
Bu	isiness or time of As ntes in Wi	Last name r Residence sociated Br hich Persor "All State	first, if ind Address (i roker or De Listed Ha s" or cheek	ividual) Number an aler s Solicited individua	or Intends	ity, State, i	Zip Code)						States

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	2	\$
	Equity		
	Common Preferred		
	Convertible Securities (including warrants)	s	\$
	Partnership Interests		
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	<u>, </u>	3277007000
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number	Aggregate Dollar Amount
	Accredited Investors	Investors	of Purchases
	Non-accredited Investors		\$5,700,000
	Total (for filings under Rule 504 only)		S
	Answer also in Appendix, Column 4, if filing under ULOE.		s
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		S
	Rule 504		s
	Total		s
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		\$
	Legal Fees	<u>X</u>	s 35,000
	Accounting Fees		S
	Engineering Fees		s 12,000
	Sales Commissions (specify finders' fees separately)		<u> </u>
	Other Expenses (identify) due diligence \$21,576 and insurance \$39,	000	s 60,576
	Total	44	s 107,576

	C. OFFERING PRICE, NUME	BER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate offeri and total expenses furnished in response to Part C — (proceeds to the issuer."	ng price given in response to Part C — Question 1 Question 4.a. This difference is the "adjusted gros	S	s 5,650,000
5,	Indicate below the amount of the adjusted gross pro- each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gros	d	
			Payments to Officers, Directors, &	Payments to
			Affiliates	Others
	Salaries and fees			
	Purchase of real estate		s	□ s <u>3,400,000</u>
	Purchase, rental or leasing and installation of mach	hinery		
	Construction of leasing of plans buildings and faci	11:1_	. ∐ 5	
	Construction or leasing of plant buildings and faci		. [] 2	
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities of another	г.	П.
	Repayment of indebtedness			
	Working capital			
	Other (specify): Reserves \$500,000 he	eld by lender, \$455.000 held	1250 .000	
	by partnership, Financing fees	s, \$365,000, brokerage fees,		
	\$250,000 (paid to affiliate)-	Acquisition fee \$395,000	m t 395.000	
	Column Totals	***************************************	□ \$ <u>645,000</u>	□s <u>5,005,00</u> 0
	Total Payments Listed (column totals added)			650,000
 R3		D. FEDERAL SIGNATURE	in and the second	推荐的人
sig	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acci	undersigned duly authorized person. If this notionish to the U.S. Securities and Exchange Comm	ce is filed under Ru ission, upon writte	le 505, the following
lss	uer (Print or Type)	Signature	Date	
	MBS-Ashley House, Ltd.			
Nα	me of Signer (Print or Type)	Title of Signer (Print or Type)	<u>.</u>	
	by 3903 South Mason, LLC,	by its managing member, MBS-	AH, Inc., b	ρ y
	general partner	Michael Smuck, President		-

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE	· • . •	•
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification	Yes	No
provisions of such rule?	5 "}	- - - - - - - - - -

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerces.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date /	
MBS-Ashley House, Ltd.	1/3/1//	
Name (Print or Type)	Title (Print or Type)	
by 3903 South Mason, LLC,	by its managing member, MBS-AH, Inc.,	
general partner	by Michael Smuck, President	

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Intend to sell to non-accredited investors in State (Part C-Item 1) State Ves No No No Nomber of Accredited Investors Manual Part State (Part C-Item 2) Number of Accredited Investors Manual Number of Non-Accredited Investors Manual Investors Amount Part State (Part C-Item 2) At Number of Accredited Investors Manual Non-Accredited Non-Accredited Investors Manual Non-Accredited		11-63-3	· · · · · · · · · · · · · · · · · · ·		AP	PENDIX		· · · · · ·		
State Yes No	I	Intend to non-a	to sell ccredited in State	Type of security and aggregate offering price offered in state		amount pui	investor and rchased in State		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
AK	State	Yes	No		Accredited	Amount	Non-Accredited	Amount	Yes	No
AZ	AL									:
AR	AK									
CO	AZ								;	<u> </u>
CO	AR									
CT	CA									
DE	со		X		1	\$50,000				Х
DC X 2 \$200,000	СТ									1
FL X 2 \$200,000	DE				<u></u>					h , a h a demand
GA	DC				<u> </u>		_			
HI	FL		X	,	2	\$200,000				X
ID	GA						_			
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IN	ID									
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LA X 79 \$5,121,676	KS									
ME	KY									
ME	LA		х		79	\$5,121,6	76			x
MA MI	ME									
MI I	MD									
1	MA									
	Ml									
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MS X 1 \$50,000	MS		х		1	\$50,000				Х

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1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pui	4 investor and rchased in State C-Item 2)	10.1	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
мо				<u> </u>		. <u></u>			
МТ									
NE									
NV									
NH									
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NM								Ī	
NY									
NC	***************************************	X		1	\$150,000		•		х
ND									
ОН									
ок									
OR									
PA									
RI									
SC									
SD					<u> </u>				
TN		х		1	\$27,500				Lecture and assemble
TX		х		4	\$157,500				<u> </u>
UT	<u> </u>				7.23.7330	ļ			<u> </u>
VT		15		<u> </u>					
VA				 					
WA					 				
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WI					ļ <u></u>			<u> </u>	
	<u> </u>	1	l	1	<u> </u>			[1.]	li

	1 1 11			APP	ENDIX						
10	:	2	3	ering price Type of investor and explanat red in state amount purchased in State waiver g			4				
	to non-a investor	to sell ccredited s in State -Item 1)	and aggregate offering price offered in state (Part C-Item 1)				amount purchased in State				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
'WY											
PR											

 \mathbb{END}